

KENTUCKY DENTAL TAC MEETING MINUTES
Transportation Cabinet
Mero Street
Frankfort, Kentucky

September 24, 2014
8:00 a.m. EST.

The meeting of the Dental Technical Advisory Committee (TAC) was called to order by Dr. Susie Riley, Chair.

The TAC members in attendance: Dr. Susie Riley, Dr. Garth Bobrowski, Dr. Wayne Lose and Dr. Matt Akridge. Mr. Todd Edwards, Interim Executive Director, Kentucky Dental Association.

Medicaid staff in attendance: Dr. Ken Rich, Ms. Carrie Anglin, Mr. Charles Douglass, Ms. Cindy Arflack, and Ms. Stephanie Bates. Dr. Julie McKee, State Dental Director, Kentucky Oral Health Program.

The Managed Care Organization (MCO) representatives in attendance were: Dr. Jerry Caudill and Ms. Emori Campbell with Avesis; Ms. Pat Russell with WellCare; Mr. Jason Trudeau with Passport; Ms. Lisa Sweeney and Mr. Craig Dalton with Scion Dental; Ms. Peg Patton with Anthem Kentucky; Ms. Christian Bowlin and Ms. Kim Howell with Humana – CareSource; Ms. Morgan Stumbo with MCNA; Mr. Russell Harper with CoventryCares. Also in attendance: Ms. Lisa Martin and Ms. Karen Ehalt with Commission for Children With Special Needs.

A motion was made by Dr. Lose and seconded by Dr. Bobrowski to approve the meeting minutes of June 18, 2014, with the typographical errors noted by Dr. Bobrowski. Motion passed.

NEW BUSINESS:

MEDICAID ROUNDTABLE: There was a discussion of the Medicaid Roundtable held on June 28, 2014. Dr. Rich stated he felt it was a good meeting and there was good dialogue and that the next step would be for the Cabinet to come back with responses to provider suggestions. Dr. Bobrowski felt the providers conveyed the message of their willingness to work with the MCOs and DMS on developing policy and guidelines and at the same time trying to help dentists see patients. He noted that various groups may convene another meeting with Secretary Haynes in mid to late October. Dr. Rich will find out if this meeting will be open to any provider to attend and suggested that Dr. John Thompson of the KDA be asked this as well. Dr. Caudill stated there was discussion of the mobile and portable issue at the Roundtable meeting as well.

Dr. Bobrowski noted that Richard Whitehouse has accepted the position of Executive Director of the KDA, and Dr. Bobrowski will furnish Ms. Anglin his contact information.

MEDICAID FORUMS: Dr. Riley noted that there was very little dental participation in Region 3 or 31 and she attributed that to the lack of promotion and publicity. Dr. Rich noted he attended two forums and the dental participation was very light. Dr. Caudill attended seven of the eight forums, and in speaking with providers, he said they were unaware of these forums taking place.

CREDENTIALING: Dr. Riley stated that members of the KDA got an email blast stating there would be an extensive new application required for credentialing that's a CMS requirement and she had emailed Ms. Veronica Cecil inquiring about this but had not received a response. Dr. Rich said there will be a response from Ms. Cecil but that the information that went out is not accurate, and Ms. Cecil is making corrections and getting better information that will be disseminated.

Dr. Rich noted that DMS is on track to have a portal where credentialing can be done electronically and this may occur by the end of the year. Dr. Lose asked if this can be tied in with the CAQH. Dr. Rich stated that the MCOs can but the information that's on the CAQH is not necessarily the information that the State requires. He further noted that the ADA is in the process of trying to put together a state-specific CAQH lookalike.

MCO'S/SUBCONTRACTORS: Ms. Anglin stated that since these meetings are open to the public, it will not be necessary for attendees to leave the room. If the MCOs have proprietary information, it is to be forwarded to Dr. Riley.

PASSPORT/AVESIS: Mr. Trudeau noted that the Passport reports were not in the booklet that was distributed to the TAC, however, he did have copies of the reports to distribute. Dr. Riley asked about the success of the rollout and how oral surgeons are now being treated. Dr. Caudill stated that Passport is now expanding statewide due to the billing change concerning dental versus medical and more oral surgeons are signing on.

Dr. Riley asked if Passport has made a decision whether to send approval letters on EPSDT. Mr. Trudeau said he would follow up with this.

HUMANA – CARESOURCE/MCNA: Ms. Howell stated she has ordered detailed claims reports from IT and as soon as she receives them, she will forward them to the TAC. She did note that the other reports requested are contained in the booklet.

Dr. Lose and Dr. Akridge noted that there are some providers still listed on the Provider List who no longer are in the network. Ms. Howell stated she would look into this. Dr. McKee asked if CoventryCares only recognizes two types of dentists, and Ms. Howell will pull the number of NPIs that are participating and at the next TAC meeting will have a revised list.

Dr. Lose asked if the wisdom teeth issue was ever settled concerning prior authorization, and Dr. Riley asked if it was just third molars or any surgical extraction that needs to be prior-authorized. Ms. Stumbo stated that the Humana CareSource manual says that all surgical extractions when reported on primary teeth need to be preauthorized as well as the surgical extractions of third molars. Dr. Riley noted that the way it is currently being applied is across the board with a 7210 or above. Ms. Morgan will look into this and get back with the TAC.

Dr. Bobrowski discussed the paperwork involved with doing extractions and PA's, and Ms. Stumbo noted that their team is looking into this. Dr. Akridge noted that he is not a provider with Humana because of this issue. Dr. Riley asked if the provider manual does not say that every surgical extraction needs to be prior-authorized but only primary teeth and third molars, what is the provider's recourse other than to write an appeal. Ms. Howell stated she would get back with the TAC on this issue.

ANTHEM/SCION: Ms. Sweeney noted that all reports have been furnished to the TAC and that volumes have increased significantly from the first quarter to the second quarter. She reviewed the Powerpoint presentation in the booklet and explained the Claim Estimator which allows providers to know if a procedure will be paid for and what the payment will be before the procedure is rendered.

Mr. Dalton noted that at the last meeting, it was asked if Scion could query CAQH concerning the credentialing process. He stated all that is needed is the CAQH number and Scion can query the database and pull any information from there. Dr. Riley asked what the average turnaround time was for credentialing new providers and what other information is needed in order to expedite the credentialing package. Dr. Dalton stated that if everything is included in the CAQH outside of the Disclosure-of-Ownership information, that nothing else should be needed.

Dr. Lose asked about a new dentist who was trying to get signed up with Scion. The new dentist was on the web portal but he could not bill until certain forms were submitted. Mr. Dalton told Dr. Lose he would speak with him after the meeting to discuss this.

Ms. Patton disclosed that that effective January 1, 2015, Anthem's new dental vendor will be DentaQuest.

COVENTRYCARES/AVESIS: Dr. Caudill stated all the reports were provided in advance and he was available to answer any questions.

Dr. McKee asked about the data not being available on the percentage of pregnant women that receive a dental visit in a reported year. Mr. Harper noted that since this information is in two different systems, there was not enough time to pull this information together. Dr. McKee also asked about the percentage of Hospital Emergency Department presentations with a dental aspect. Dr. Caudill noted that he has put the ADA in touch with the Medical Directors and Dr. Langefeld to discuss how to integrate the two together. Dr. McKee asked about the significant jump in sealant services from the first to the second quarter, and Dr. Caudill noted that Avesis' mission is to increase sealant use across the state.

General Discussion: Dr. Riley asked about the quarterly reports that Dr. Sharpe was going to run to compare the ratio of extractions to restorative procedures. Dr. Caudill stated there is an explosion in extractions due to the Medicaid

Expansion. Dr. Lose said the problem is that oral surgeons are either no longer taking Medicaid patients or are limiting their services to people under the age of 21. Dr. Caudill stated that part of the problem is due to the fee schedule and Avesis has gone to its partners with proposals on how to address this issue. Dr. Bobrowski noted that the KDA has sent a letter to DMS requesting a 25% increase in reimbursable fees across the board for all procedures.

Dr. Riley brought up the issue of credit card reimbursements. Dr. Caudill stated that the virtual credit card program provides a streamlined approach to the payment disbursement process and provides better security. He did note that the provider letter that went out could have been clearer in explaining the payment program. It was clarified that if a provider does not want to participate in the credit card reimbursement system, the provider can call a Provider Services' rep to opt out of the credit card payment.

WELLCARE/AVESIS: Dr. Caudill stated that the reports were provided in advance. Ms. Russell noted that the second quarter information did not appear on the reports in the booklet and she will supply this to the TAC.

Dr. Akridge stated that WellCare is the only MCO that requires multiple teeth to be impacted in order to get orthodontic approval. Dr. Caudill stated that the Kentucky Revised Statute reads teeth, not tooth, and Dr. Akridge wanted it noted in the minutes that he would prefer it say any impacted tooth in the mouth other than a third molar.

Dr. Bobrowski asked why fee reimbursements were reduced 17 to 22% for posterior composites. Ms. Russell said she did not have an answer but would get a response back to the TAC within seven to ten days. Dr. Bobrowski noted that on the grid, there were two categories of D0150 codes with different pay amounts. Dr. Caudill stated that was because the KAR does not address D0120, therefore, the D150 has to be submitted twice but the second one for each year will be paid at the 120 rate as a recall visit.

OTHER GENERAL DISCUSSION: Dr. Riley noted that the TAC had some reports from DMS but no one from DMS was present to address the reports. She requested that the TAC would like to have the utilization reports either by procedure code or by service type, and Ms. Anglin stated she has forwarded that request.

ISSUES TO BE DISCUSSED:

NETWORK ADEQUACY: Dr. Riley noted that this has been addressed by the MCOs.

ORAL SURGEONS: Dr. Riley noted that this has been discussed.

NON-PAYMENT OF CLAIMS RELATED TO TAXONOMY: Ms. Howell of CareSource stated that every provider enrolled with Medicaid needs to make sure the taxonomy on their claims is what is on file with DMS. She noted that CareSource will start administratively adjusting claims if there is a one-to-one match.

Ms. Howell informed the TAC that ADO's expire April of 2015 and NPI's expire October 30, 2014. Dr. Rich noted that there is most likely going to be legislation proposed to extend the time limit and he suggested that the KDA may want to advocate for this. Dr. Caudill stated that DMS approved a change form to allow providers to supply the information to Avesis who scrubs the information and then, in turn, sends it to DMS, and Ms. Howell stated that CareSource does this as well.

NO SHOWS/FAILURES: Dr. Rich stated the only places where there has been a reduction in this or any success has been areas where there is a community outreach person in place. Dr. McKee noted that the Department for Public Health and the Cabinet are applying for a State Plan Amendment to allow the State Plan to underwrite the services of a community healthcare worker that would include dental navigation.

Dr. Riley reported that her take-away from the MCO forums was that providers think that if MCO's now use gift cards to incentivize members to get their annual dental exams, they could also use the gift cards to motivate members to show up for a certain number of treatment appointments without fail. She further noted that this incentive would improve health outcomes for members, decrease emergencies, and be a win/win for all.

A motion was made by Dr. Akridge and seconded by Dr. Lose to adjourn the meeting. No date was set for the next meeting.

(Minutes were taped and transcribed by Terri Pelosi, Court Reporter, this the 8th day of October, 2014.